

Amendments to the Claims:

This listing of claims will replace all prior versions, and listings, of claims in the application:

Listing of the Claims:

1. (Currently Amended) A method of performing transluminal mitral annuloplasty, comprising the steps of:
 - providing a catheter, having a prosthesis thereon;
 - inserting the catheter into the venous system;
 - transluminally advancing the prosthesis into the coronary sinus such that a distal end portion of the prosthesis is in contact with an inner wall of the coronary sinus;
 - actuating a control-element pull wire on the catheter to selectively actively advance at least one tissue anchor on the distal end portion from a retracted position to an extended position; and
 - manipulating a component of the prosthesis to cause the prosthesis to exert force on the mitral valve annulus.
2. (Original) A method as in claim 1, further comprising the step of percutaneously accessing the venous system prior to the transluminally advancing step.
3. (Original) A method as in claim 2, wherein the accessing step is accomplished by accessing one of the internal jugular, subclavian and femoral veins.
4. (Original) A method as in claim 1, further comprising the steps of first measuring the coronary sinus and then selecting an appropriately sized prosthesis prior to the inserting step.
5. (Original) A method as in claim 1, further comprising the step of measuring hemodynamic function following the manipulating a component of the prosthesis step.
6. (Original) A method as in claim 5, further comprising the step of determining an ongoing drug therapy taking into account the post implantation hemodynamic function.
7. (Original) A method as in claim 1, wherein the advancing at least one tissue anchor step comprises advancing the anchor from an axial orientation to an inclined orientation.

8. (Original) A method as in claim 7, wherein the tissue anchor has a proximal end for piercing tissue and a distal point of attachment to the prosthesis, and the advancing at least one tissue anchor step comprises rotating the anchor about the point of attachment.

9. (Original) A method as in claim 1, comprising advancing at least two tissue anchors to an extended position.

10. (Original) A method as in claim 8, comprising advancing at least two tissue anchors to an extended position.

11. (Original) A method as in claim 1, wherein the manipulating a component of the prosthesis step causes the prosthesis to transform into a curved configuration having a first side facing towards the mitral valve annulus and a second side facing away from the mitral valve annulus.

12. (Currently Amended) A method as in claim 11, additionally comprising the step of advancing at least two tissue anchors wherein the tissue anchor is configured to be advanced in the direction of the mitral valve annulus.

13. (Cancelled)

14. (Original) A method as in claim 1, wherein the manipulating step comprises axially moving a forming element with respect to the prosthesis, to bend the prosthesis.

15. (Original) A method as in claim 1, further comprising the step of locking the prosthesis to retain a force on the annulus following the manipulating step.

16. (Withdrawn) A method as in claim 15, wherein the locking step comprises moving an engagement surface from a disengaged configuration to an engaged configuration.

17. (Original) A method as in claim 15, wherein the locking step comprises providing an interference fit.

18. (Withdrawn) A method as in claim 15, wherein the locking step is accomplished with a threaded engagement.

19. (Original) A method as in claim 5, wherein the step of monitoring hemodynamic function is accomplished using transesophageal echo cardiology.

20. (Withdrawn) A method as in claim 5, wherein the step of monitoring hemodynamic function is accomplished using surface echo cardiographic imaging.

21. (Withdrawn) A method as in claim 5, wherein the step of monitoring hemodynamic function is accomplished using intracardiac echo cardiographic imaging.
22. (Withdrawn) A method as in claim 5, wherein the step of monitoring hemodynamic function is accomplished using fluoroscopy with radiocontrast media.
23. (Withdrawn) A method as in claim 5, wherein the step of monitoring hemodynamic function is accomplished using left atrial or pulmonary capillary wedge pressure measurements.

24-54. (Canceled)